



Consent for Access to Property

Name (please print): _____

Complete address of property to be sampled: _____

Phone #: _____ E-mail: _____

I consent to officers, employees, contractors, and authorized representatives of the United States Environmental Protection Agency (U.S. EPA) entering and having continued access to this property for the following purposes, as authorized by and consistent with CERCLA Section 104, 42 U.S.C. Section 9604 and the National Oil and Hazardous Substances Pollution Contingency Plan (NCP) 40 CFR Part 300:

- Conducting investigations, monitoring, surveys, testing, and sampling activity pursuant to CERCLA Sections 104(b) and 104(e);
- Conducting removal site evaluation as defined by 40 CFR §300.410;
- Conducting removal actions as defined by 40 CFR §300.415; and
- Taking any response action to address any release or threatened release of a hazardous substance, pollutant or contaminant which U.S. EPA determines may pose an imminent and substantial endangerment to the public health or the environment (CERCLA Section 104(a)).

I realize that these actions taken by EPA are undertaken pursuant to its response and enforcement responsibilities under the Comprehensive Environmental Response, Compensation and Liability Act of 1980, as amended, 42 U.S. C. §9601-9675 (1997). I give this written permission voluntarily, on behalf of myself and all other co-owners of the property, with knowledge of my right to refuse and without threats or promises of any kind.

Signature: _____

Date: _____

Questions about Property:

1. Are you the owner ____ or the tenant ____ of the home or building?

PLEASE NOTE THAT THE EPA MUST OBTAIN ACCESS FROM THE LEGAL PROPERTY OWNER PRIOR TO TAKING ANY ACTION.

2. Are any of the following sensitive populations present in the home? If so, please indicate number of sensitive populations below.

Children (Infant to 7 years old): _____

Children (7 to 18 years old): _____

Pregnant or nursing women: _____

3. Please indicate the total number of people living in the home:

Children (Infant to 18 years old) _____

Adults (18 years and older): _____

4. If you are the tenant, write the owner's information below.

Owner's Name: _____

Owner's Address (street, city & zip): _____

Owner's Phone #: _____ E-mail: _____

4. If you are the owner, but live at a different address, write your address below (this is the address where EPA will send communications; otherwise, communications will be mailed to the address at the top of the page):

Owner's Address (street, city & zip): _____

Owner's Phone #: _____ E-mail: _____

5. If you are the owner, but live at a different address, write your tenant's contact information below:

Tenant's Name: _____

Tenant's Phone #: _____ E-mail: _____

Please return this form to:

Katherine Thomas

EPA Region 5

77 W Jackson Blvd SR-6J

Chicago, IL 60604

E-mail: thomas.katherine@epa.gov